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Docket No.: N9810.0025/P025
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Harry A. Dugger, III et al.

Application No.: 10/671,715

Confirmation No.: 9275

Filed: September 29, 2003

Art Unit: 1616

For: BUCCAL, POLAR AND NON-POLAR
SPRAY CONTAINING ZOLIPIDEM

Examiner: M. Haghighatian

INFORMATION DISCLOSURE STATEMENT (IDS)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Information Disclosure Statement is filed more than three months after the U.S. filing date, OR more than three months after the date of entry of the national stage of a PCT application, AND after the mailing date of the first Office Action on the merits, whichever occurs first, but before the mailing date of a Final Office Action or Notice of Allowance (37 CFR 1.97(c)).

12/22/2006 ZJUHR1 00000020 10671715

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180.00 OP

DSMDB-2189025v01

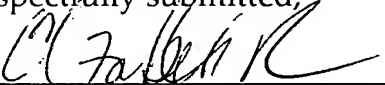
A summary/abstract translation of the non-English language references is enclosed.

In accordance with 37 CFR 1.98(a)(2)(ii), Applicant has not submitted copies of U.S. patents and U.S. patent applications. Applicant submits herewith copies of foreign patents and non-patent literature in accordance with 37 CFR 1.98(a)(2).

Please charge our Credit Card in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). Credit Card Payment Form SB-2038, with a signature from an authorized cardholder, is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1073, under Order No. N9810.0025/P025. A duplicate copy of this paper is enclosed.

Dated: December 21, 2006

Respectfully submitted,

By 

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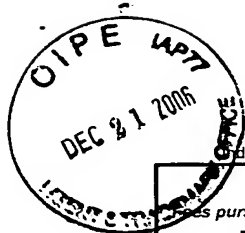
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Attorneys for Applicant



Effective on 12/08/2004. Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2006		Application Number	10/671,715-Conf. #9275
		Filing Date	September 29, 2003
		First Named Inventor	Harry A. Dugger, III
		Examiner Name	M. Haghighatian
		Art Unit	1616
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	N9810.0025/P025
TOTAL AMOUNT OF PAYMENT		(\$)	180.00

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- =		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =		/50	(round up to a whole number) x		=		
4. OTHER FEE(S)							
Non-English Specification. \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement						180.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	32,115
Name (Print/Type)	James W. Brady	Telephone	(202) 420-4786
		Date	December 21, 2006



PTO/SB/08a/b (07-05)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Substitute for form 1449A/B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known	
				Application Number	10/671,715
				Filing Date	September 29, 2003
				First Named Inventor	Harry A. Dugger, III
				Art Unit	1616
				Examiner Name	M. Haghighatian
Sheet	1	of	2	Attorney Docket Number	N9810.0025/P025

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
	A01	US-2004/136913	07/2004	Adb El-Shafy Mohammed et al.	
	A02	US-2003/082107	05/2003	Dugger	
	A03	US-2003/077227	04/2003	Dugger	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				
	B01	WO 02/094234	11/2002	PCT		
	B02	WO 00/62757	10/2000	PCT		
	B04	WO 99/16417	04/1999	PCT		

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	C01	Goodman and Gilman's The Pharmacological Basis of Therapeutics, 9th ed., pp. 490 ✕	
	C02	Goodman and Gilman's The Pharmacological Basis of Therapeutics, 9th ed., pp. 496 ✕	
	C03	Goodman and Gilman's The Pharmacological Basis of Therapeutics, 9th ed., pp. 497 ✕	
	C04	Goodman and Gilman's The Pharmacological Basis of Therapeutics, 9th ed., pp. 471-472	

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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